KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form U3C
June 2015
Form must be Typed
Form must be completed on a per well basis

ANNUAL REPORT OF PRESSURE MONITORING, FLUID INJECTION AND ENHANCED RECOVERY

Complete all blanks - add pages if needed. Copy to be retained for five (5) years after filing date.

OPERATOR: License # 9855
Name: Grand Mesa Operating Company
Address 1: 1700 N WATERFRONT PKWY BLDG 600
Address 2:
City: WICHITA State: KS Zip: 67206 + 5514
Contact Person: Ron Fowler
Phone: (316) 265-3000
Lease Name: KLAUS
Well Number: 1-33

API No.: 15-063-21903-00-01
Permit No: E34423.1
Reporting Year: 2024
(January 1 to December 31)

S2 - SW - NW - NE Sec. 33 Twp. 13 S. R. 31 ☐ E ☑ W
(Q/Q/Q/Q)
1257 feet from ☑ N / ☐ S Line of Section
2310 feet from ☑ E / ☐ W Line of Section
County: Gove

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☑ Treated Brine ☐ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: _____ mg/l Specific Gravity: _____ Additives: _____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 1000 psi Injection Zone: LANSING
Maximum Authorized Injection Rate: 1000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: _____ *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	3887	0	0	0	31
February	6279	0	0	0	28
March	8337	0	0	0	31
April	6947	0	0	0	30
May	3601	0	0	0	31
June	2201	0	0	0	30
July	9979	0	0	0	31
August	10667	0	0	0	31
September	10323	0	0	0	30
October	10694	0	0	0	31
November	10373	0	0	0	30
December	10565	0	0	0	31
TOTAL	93853		0		

Submitted Electronically